



1600 – 9th Street
Sacramento, CA 95814
(916) 654-5585

Evaluation of Yolo County's MHSA Three Year Expenditure Plan

CSS Review Committee: Kay Tucker, Mark LeBeau, Rose King and Rosie Lamb
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Review of Planning Process

Yolo County reached out to its underserved and unserved communities during their planning process. They offered some of their materials in three languages besides English and provided translators if needed at public meetings. The County stated in report (page 22) that it had difficulty engaging unserved community members to participate in the planning process. On page 10 there was discussion documented that the County is not sure that they will be implementing a SB 163 program by year three. This is a serious concern for the OAC and will determine the OAC's funding recommendations for the children's workplan. There is evidence of Yolo County continuing to meet throughout the implementation process to evaluate the county's progress and the County is to be commended for this.

OAC Concerns:

- Throughout the plan there is mention of the MHSA Community Planning Council. The committee would like to know who specifically comprised this council, who they represented i.e. consumers, family members, CBO's, business, county departments and agencies etc. The committee would like to know that a broad range of individuals was represented within this group.
- On page 14 there is mention of the Rumsey Indian Reservation being notified that the MHSA draft plan was available for review. Were they involved in the planning process and were any meetings held at the reservation? They are not listed in Attachment Seven.
- What were the binational cultural events in October 2005 where the department performed outreach?

Review of Consumer and Family Involvement

The Committee commends Yolo county for distinguishing between consumer input from current consumers and unserved consumers. The County states that it had difficulty obtaining input from unserved consumers. There is evidence that consumers and family members were hired as paid employees through the four workplans.

OAC Concerns:

- On Page 22 the plan documents the difficulty in obtaining input from unserved consumers despite the county's best efforts. What will the county be doing in the future to seek engagement from these consumers?

Fully Served, Underserved/Inappropriately Served, Unserved

The County acknowledges that it does not have a systematic method to track fully served clients. This is something under development for the county. The Committee is interested to know how the county will seek to measure service levels other than using number of contacts, which the county acknowledges is not an accurate indicator.

OAC Concerns:

- On page 80 there is discussion of the Native American population being historically un-served and underserved. Further down on the same page the County documents that individuals from the Native American community are very self-sufficient and have their own resources. Given the conflicting statements, does the county plan a more concerted effort to work with the Native American population to accurately assess their needs?
- In general will the County seek to fill some of their services contracts with local, ethnic community based organizations to assist in reaching out to the underserved and un-served populations?

Wellness/Recovery/Resilience

As stated in the beginning of this document the County is debating whether to establish a SB 163 program for children. The county is planning a full service partnership program for this age group as one of their workplans.

OAC Concerns:

- The MHSA guidelines are specific that counties provide an SB 163 program within their Expenditure Plans if one is currently not in place. Yolo County being a rural county, has until year three to implement such a plan. While Yolo County is considering implementing an SB 163 wraparound program, the OAC will not recommend funding the Children's workplan unless Yolo County commits to creating a SB 163 program. Please see language after concerns.
- What will the ratios be for the full service partnership programs regarding staff: client?
- Will flex funds be available for full service partnerships?
- There is not a strong focus within the plan on meeting the unique needs of the LGBT and deaf communities. Has the County addressed this?

MHSA Requirement:**Wraparound Services for Children, Youth & Families**

The Mental Health Services Act includes a very specific requirement that all counties must develop a Wraparound Program for children and their families as an alternative to

group home placement. This is a requirement of specific interest to the Oversight and Accountability Commission as it is an essential component of transforming children's mental health services by reducing unnecessary reliance on institutional care and developing intensive community services and supports for seriously emotionally disturbed/mentally ill children, adolescents and their families. Specifically, the MHSA (Section 10, Part 3.7, section 5847(a) (2) states:

“Each county mental health program shall prepare and submit a three year plan which shall be updated at least annually and approved by the department after review and comment by the Oversight and Accountability Commission. The plan and update shall include all of the following ... (2) A program for services to children in accordance with Part 4 to include a program pursuant to Chapter 6 of Part 4 of Division 9 commencing with Section 18250, or provide substantial evidence that it is not feasible to establish a wraparound program in that county.”

According to Webster's New Collegiate Dictionary, “feasible” means “capable of being done or carried out.”

Wraparound, as defined in W&I Code commencing with Section 18250(a), is intended “to provide children with service alternatives to group home care through the development of expanded family-based services programs.” Note that this statutory language states that wraparound service is an alternative to group home care – not simply a step-down program. SB 163 programs, codified in Section 18250-18257 of the W&I Code, are very intensive services for children or adolescents who would otherwise be placed in high-level group homes at Rate Classification Level (RCL) Level 10 through 14. SB 163 makes the funds that otherwise would have been used for group home placement available instead for intensive Wraparound service as an alternative to the group home placement. This level of funding is essential to assure that the level of staffing and intensity of service required to support children with this high level of need is provided, so that SB 163 Wraparound Programs are in fact a viable alternative to intensive group home programs. The California Department of Social Services (CDSS) document “Review of Wraparound Standards, Guidelines for Planning and Implementation” (attached) includes the staffing ratios expected in a SB 163 Wraparound program.

It should be noted that SB 163 was based on the premise that the state and county share of the nonfederal reimbursement for group home placement would instead be made available to support Wraparound as an alternative to group home placement in a manner that was cost neutral to the state and to the county, i.e., it would cost the state and the county no more to provide intensive Wraparound services than they otherwise would have spent for group home placement for the same child. Because almost all the children that are, or otherwise would be placed in a group home program, are eligible for MediCal and EPSDT, very few MHSA funds other than the 5% EPSDT match are required to develop a SB 163 Wraparound program. The W&I Code commencing with section 18250, which is the code section for SB 163 programs, states, in part, “(b) It is the further intent of the legislature that the pilot project include the following elements: (1) making available to the county the state share of nonfederal reimbursement for group home placement, minus the state share, if any, of any concurrent out-of-home placement costs, for children eligible under this chapter, for the purpose of allowing the county to develop

family-based service alternatives.” Section 18254 (c) states “The department shall reimburse each county, for the purpose of providing intensive wraparound services, up to 100 percent of the state share of nonfederal funds, to be matched by each county’s share of cost as established by law, and to the extent permitted by federal law, up to 100 percent of the federal funds allocated for group home placements of eligible children, at the rate authorized pursuant to subdivision (a).” Accordingly, any new or expanded Wraparound program meeting the requirements of the MHSA should include the state and county share of the group home rate for each wraparound slot to assure that the level of staffing and intensity of service required to support children with this high level of need is provided.

The Mental Health Services Act, anticipating that counties would need technical assistance to develop SB 163 Wraparound programs, includes a provision (Section 6, 18257(b) that funds from the Mental Health Services Fund shall be made available to the Department of Social Services for technical assistance to counties in establishing and administering these projects. This technical assistance is available, at no cost to the county, by contacting Cheryl Treadwell, Program Manager, CDSS, at (916) 651-6023.

Education and Training and Workforce Development

The County did a good job in describing its current workforce and capabilities, especially in providing services in other languages. Additionally the county was able to provide a breakdown of the ethnic composition of its staff.

OAC Concerns:

- On page 65 there is discussion of the barriers the County faces in meeting its capacity needs. The County does not provide an outline as to how it will seek to break the barriers to hiring qualified staff and consumers and family members. Has the county identified any specific strategies to meet its needs? If so, what are they?
- Has the County discussed partnering with any of the local educational institutions to meet its workforce needs?
- One page 172 in the budget narrative for one-time expenditures, there are 4 staff trainings in the budget. Are these 4 trainings to be held annually for a grand total of 12, or will there be 4 trainings over the span three years? If it is the latter, will this meet the training needs of the county when on page 65 it is documented that training in recovery may also be a barrier to MHSA implementation?

Collaboration

There is evidence of good collaboration with certain groups within the County’s plan. The county has identified the county jail, court system, IHSS and Department of Aging as partners within their plan. Additionally, the Department of Mental Health is combined with Dept. of Alcohol and Drugs which facilitates collaboration between these two entities. The County is to be commended for continuing to have their MHSA Community Planning Council meet throughout the implementation process to evaluate its progress.

OAC Concerns:

- The Committee would like to see more identification of local community based partnerships that the County plans to collaborate with (such as what was done in the Greater Capay Valley Children's workplan). The County mentions these organizations, such as faith-based and ethnic organizations but does not identify any organizations specifically that will be partners in providing services. Has the County identified these organizations yet and were they involved in the planning process?
- Will the County be partnering with business, labor and civic organizations to provide services?

Review of Workplans**#1 Greater Capay Valley Children's Pilot Program****OAC Concerns:**

- Youth who identify themselves as part of the LGBT population are historically inappropriately and/or underserved by mental health providers. Given this is it safe to say that the County will need to seek out consultation and education/training from qualified agencies on providing services to this group rather than waiting to see if this service is needed? Or is this need truly not realized at this time? This being said the County is to be commended for reaching out to the organized LGBT youth groups.
- If there are children currently placed out of county, will they be re-assessed to determine if they would be able to return to the family home under this program?
- Are there any CBO's serving ethnic communities the County can collaborate with in providing this service?
- Will there be any paid full-time positions for consumers and family members?

#2 Transition Age Youth - Pathways to Independence**OAC Concerns:**

- On page 103 there is mention of a Yolo County Cultural Competency Plan. The Committee would like to understand its contents of the plan.
- On page 101 there is discussion of partnering with the Department of Rehabilitation, DESS/Workforce Investment Act, Regional Occupational Program and local community colleges regarding employment services. Were these groups represented in the stakeholder process? Was any input solicited from the business and labor communities that will be hiring TAY youth? Have any local CBO's been identified to partner with the County regarding these services?
- What will the staff:client ratio be within workplan?

#3 Consumer Wellness Alternatives**OAC Concerns:**

- The County acknowledges the transportation difficulties for consumers within the workplan and the committee wonders how access to the center will be addressed.
- On page 121 there is discussion regarding training on Cognitive Behavioral Therapy (CBT) for county staff, provider staff and other interested individuals. This was not reflected in workplan budget. Is this part of training allotted in the one-time expenditures for training?
- The Committee would like to have more information on the community based organizations that the county plans to collaborate with in providing services to adult consumers.

#4 Older Adult Outreach and Assessment Program

OAC Concerns:

- Where will the out of home crisis/stabilization component be located?
- Were the agencies listed on page 148 identified as collaboration partners part of the stakeholder planning process?

CONCLUSION

Question: The overarching question for the Oversight and Accountability Commission is:” How will the three-year Community Services and Supports plan move your county system toward the standard of comprehensive, timely, appropriate services in the Mental Health Services Act?” **The Commission asks that the county prepare to answer this question as the first year of CSS plans are implemented.**

The Commission recognizes the need to build a more reliable baseline of information available to everyone, so that answers can be understood within a context. To do so, the Commission is seeking to develop a description of the mental health system in your county, and in all counties, including an explanation of the structure of the service delivery system, access policies for all children and adults, and range of services received by those not in a categorical funded program.

The Commission is working to develop a baseline to assess the gaps between existing standards of care in mental health and the comprehensive, integrated services envisioned by the Mental Health Services Act. Statewide and national reports tell us that services have been limited and effectively rationed because funding is not tied to caseloads. The Commission believes it will be advantageous to all of the individuals and the private and public organizations involved in change, and beneficial to the public, to have a realistic understanding of the challenges to transforming the mental health system.

In the coming year, the Commission will seek information such as the average caseloads for personal service coordinators and/or case managers and for psychiatrists for the largest percentage of people served. We would like to know what percentage of all mental health consumers are receiving or have access to comprehensive, appropriate, and integrated services, such as individual or group therapy, family counseling, routine medical and dental care, educational or vocational training, substance abuse treatment, supportive housing, and other recovery-oriented services.

To begin with, the Commission will compile available data from traditional sources, and utilize the information you have provided in the CSS plan. In this first year of implementation, we will be enlisting your assistance in measuring the magnitude of changes taking place now and the prospective changes for many years to come. The Commission also will be asking you to determine and report on what resources are lacking in your county. The CSS Committee recognizes the tremendous effort involved in the planning process and commends the county on its many successes.